CITY OF MILWAUKEE ELECTION COMMISSION VOTER REGISTRATION APPLICATION

QUALIFICATIONS	 By marking this circle, I certify that I am a qualified elector: I am a United States citizen I will be at least 18 years old on the day of or before the next election I am not currently serving a sentence, including probation, parole, or extended supervision, for a felony conviction I will have lived at my address for at least 10 days before the next election with no present intent to move I am not otherwise disqualified from voting If you do not meet each of these qualifications, you are not qualified to register. Do not complete this form. I am registering to vote because (select one): 		
NOTING QU	 I was previously registered to vote in Wisconsin, but my name and/or address has changed. NOTE: If this is a change of address, your voting rights will be cancelled at yor previous residence. I am a new Wisconsin voter. NEW WI VOTERS: If you are submitting your completed form by MAIL, you must include a photocopy of a proof of residence document. Visit our web site or call for information on acceptable documents. If you do not provide this document, you will be asked for identification the first time you vote. 		
IDENTIFICATION	If you have been issued a Wisconsin (WI) Driver License or a WI State ID, record the ID number: ———————————————————————————————————		
	X X X - X X -		
IDEN	Check this circle if you have never been issued a WI Driver License, WI ID or a Social Security Number.		
	PRINT your name EXACTLY as it appears on your identification - WI DL/ID or SSN (as recorded above):		
_	First Name:	Middle Name/Initial (if any on ID):	
CURRENT	Last Name:	Circle: Jr., Sr., II, III, IV	
	Address:	Apartment/Unit Number:	
5	City of Milwaukee, WI	Zip Code:	
	Date of Birth (Month/Date/Year):	Telephone Number: ()	
\circ	If your name and/or address has changed since you last registered, what was your previous name/address?		
	First Name: Middle:	Last Name:	
	Address:	Apt./Unit Number:	
	City: State:	Zip Code:	
	All statements on this form are true and correct. If I have provided false information, I may be subject to fine or imprisonment under State and Federal laws.		
	VOTER SIGNATURE HERE	Date (Month/Date/Year)	
	I would like information on serving as a City of Milwaukee election worker.		
	IF APPLICABLE, TO BE COMPLETED BY SPECIAL REGISTRATION DEPUTY (SRD):		
	SRD Print Name: Signature:	ID Number:	
	OFFICE USE ONLY District: Ward:	NV AC NC DUP	
	**************************************	Nv AC NC DUP Init:	
	The state of the s		

Return this completed form to:

City of Milwaukee Election Commission

200 E. Wells St., Room 501, Milwaukee, WI 53202

414-286-3491

Instructions for completing the City of Milwaukee Voter Registration Application

1) **Voting Qualifications.** By marking the circle, you are certifying that you meet the listed qualifications to vote. Do NOT complete the form if you are not qualified.

Additionally, indicate your reason for completing a voter registration application as a new (first-time) Wisconsin (WI) voter or because your name and/or address has changed since you last registered to vote.

2) **Identification**: If you have been issued a WI Driver License, or a WI State Identification (ID), you are required by federal law to record this number on your voter registration application (even if the address on this ID is not your current voter registration address). If you have <u>never been issued</u> either of these ID's, you may record the last four digits of your Social Security Number.

Mark the bottom circle if you have never been issued a WI Driver License, State ID or a Social Security Number.

3) **Current Information:** Provide your current and complete name <u>exactly</u> as it appears on the above ID, including your last name, first name, middle name/initial and any suffix (Jr., Sr., etc).

Provide your City of Milwaukee residential address including your full house number, your street directional (N, S, E or W), your full street name and the street suffix (St., Ave., Lane, etc.) and your zip code. A P.O. Box is not acceptable as a residential address and cannot be used.

Provide your date of birth. Your telephone number is optional but will help the Election Commission if there are any questions regarding your registration.

- 4) **Previous Information:** If you were previously registered to vote, either in or outside of Wisconsin, record the name and address of your previous registration.
- 5) **Signature:** By signing and dating this form, you certify that all of the information you have provided on this form, including your qualifications to vote, is true and correct. Providing false information is subject to a fine or imprisonment under State and Federal laws.

Mark the circle under your signature if you would like to receive information on serving as a City of Milwaukee election worker.